

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	319	10-3-96
TYPIST	28	11/3/96
VERIFIER	512	12/3
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

# INDEX OF CLAIMS

Claim	Date
Final	Original
1	1/12/96
2	1/12/96
3	1/12/96
4	1/12/96
5	1/12/96
6	1/12/96
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46	1/12/96
47	1/12/96
48	1/12/96
49	1/12/96
50	1/12/96

SYMBOLS

Rejected

Allowed

(Through numeral)

Canceled

Restricted

N

Non-elected

I

Interference

A

Appeal

O

Objected

Claim	Date
Final	Original
51	
52	
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(LEFT INSIDE)